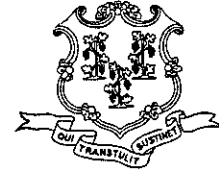


STATE OF CONNECTICUT

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**TESTIMONY OF DR. H. WAYNE CARVER BEFORE THE APPROPRIATIONS  
COMMITTEE**

**Re: HB 5016 AN ACT IMPLEMENTING THE GOVERNOR'S  
RECOMMENDATION CONCERNING GENERAL GOVERNMENT**

March 8, 2012

Senator Harp, Representative Walker, Senator Kane, Representative Miner and Members of the Appropriations Committee

I wish to address the above cited bill. Specifically, Sections 9-13 which deals with The Office of the Chief Medical Examiner. This bill addresses two subjects. First, line 356 is designed to make references to the Chief Medical Examiner gender neutral, which I fully support. The remainder of the changes in this bill is designed to place the Office of the Chief Medical Examiner under the purview of the University of Connecticut Health Center and the University of Connecticut in general. The Office of the Chief Medical Examiner opposes this aspect of this bill.

Making this transfer would not address the administrative problems the office is now experiencing. I perceive no pathway for financial savings and it is even possible that the University will be forced to hire extra personnel to service this office. Finally, this creates an irreconcilable conflict of interest. The Office of the Chief Medical Examiner was conceived and meticulously crafted by the legislature to be a neutral entity, as far as possible, not associated with any other organ of government or politics. The Commission, which governs the office as constructed, represents various legal and medical constituencies without regard to political affiliation. Commissioner's terms are staggered in order as much as possible to separate their functions from the cycle of electoral politics.

The reason for this isolation is because the work product and judgments made by the Medical Examiners Office are frequently used in the settlement of various adversarial processes. The criminal trials which are so prominent in the public eye are only the tip of the iceberg. Other adversarial processes to which we contribute include civil litigation and the negotiations which frequently eliminate the need for formal trial on both criminal and civil situations, disciplinary actions before licensing boards both for individuals and institutions, adjustment of insurance contracts and numerous watch dog entities, which scrutinize the quality of the work of various professional institutions and government agencies.

The proposed legislation would place us under the administrative and financial control of one of the institutions we are called upon to investigate when there is an allegation of a fatal error. The fact that this is inappropriate is obvious.

While the proposed legislation does specify that the Commission "shall have independent decision-making authority", it makes no such allowance for the OCME. Moreover, the legislation is simply not clear on what kinds of decisions would legitimately remain within the province of the Commission and what sorts of decisions would now be relegated to the University. Plainly, the respective lines of authority within a division of the University would need to be clearly delineated. One might well imagine that there would be no purpose for this legislation if it were not expected that certain "administrative, financial and resource" decisions were being removed from the Commission and placed within the purview of the University, and the legislature should be prepared to debate and clarify where it would like these lines to be drawn.

Over and above the prospect of potential conflicts spelled out above, the structural and procedural changes wrought by this proposed merger raise numerous questions regarding the application or regulations and rules governing employees of the University and those regulating employees of the OCME. For example, would the numerous circumstances where OCME employees are paid by third parties for their time and services be forbidden or subject to review from the Office of Compliance at Storrs? Similarly, would the Chief Medical Examiner or the Commission members be permitted to lobby members of the legislature concerning matters that directly affect their constituents without prior approval of the Office of Compliance? Would the University Administration have unilateral authority over any aspect of OCME facilities, resources, expenditures or direction? These are questions that require meaningful input from the University, the Office of the Attorney General and others before we can even begin to imagine the implications.

None of this obviates the fact that the Office of the Chief Medical Examiner's currently experiencing severe administrative problems which need to be addressed. However, I posit that the solutions purposed in this bill are both inadequate and inappropriate and Section 9-13 should be abandoned.

I thank the committee for allowing me the opportunity to express my concerns and look forward to entertaining your questions.